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Fax

To: Examiner: Steven Ho Yin Loke **From:** John S. Sensny, Esq.
Group Art Unit: 2811
Confirmation No.: 6830

Fax: 571-273-8300 **Pages:** 18 (Including fax cover sheet)

Phone: **Date:** November 22, 2005

Re: Applicants: David V. Horak, et al.
 Serial No.: 10/752,386 **cc**
 Filed: January 6, 2004
 For: FORMATION OF A FAT DISPOSABLE
 SPACER TO 'POST DOPE' POLYSI GATE
 CONDUCTOR
 Docket: FIS920030114US1 (16509)

AMENDMENT UNDER 37 C.F.R. §1.111

TRANSMITTED HEREWITH:

1. Amendment Transmittal Letter in duplicate;
2. Amendment under 37 C.F.R. §1.111; and
3. Certificate of Facsimile Transmission, dated November 22, 2005 (in duplicate).

FOR:

Applicants: David Horak, et al.
 Serial No.: 10/752,386
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): David V. Horak, et al.

Docket No.

FIS920030114US1 (16509)

Application No.
10/752,386Filing Date
January 6, 2004Examiner
Steven Ho Yin LokeGroup Art Unit
2811

Invention: FORMATION OF FAT DISPOSABLE SPACER TO POST DOPE POLYSI GATE CONDCUTOR

CONFIRMATION NO.: 6830

I hereby certify that this AMENDMENT UNDER 37 C.F.R. 1.111
(Identify type of correspondence)
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 on November 22, 2005
(Date)

John S. Sensny(Typed or Printed Name of Person Signing Certificate)John S. Sensny
(Signature)

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NOV 22 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): David V. Horak, et al.

Docket No.

FIS920030114US1 (16509)

Application No. 10/752,386	Filing Date January 6, 2004	Examiner Steven Ho Yin Loke	Customer No. 23389	Group Art Unit 2811	Confirmation No. 6830
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Invention: FORMATION OF A FAT DISPOSABLE SPACER TO POST DOPE A GATE CONDUCTOR

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	18 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable)		<input type="checkbox"/>			\$0.00
					\$0.00

TOTAL ADDITIONAL FEE FOR THIS AMENDMENT

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- Please charge Deposit Account No. _____ in the amount of _____
- A check in the amount of _____ to cover the filing fee is enclosed.
- The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0458/IBM
- Any additional filing fees required under 37 C.F.R. 1.16.
 - Any patent application processing fees under 37 CFR 1.17.
- Payment by credit card. Form PTO-2038.

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John S. Sensny
Signature

Dated: November 22, 2005

John S. Sensny
Registration No. 28,757

Correspondence Address
Customer No. 23389

cc: JSS:jy

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NOV 22 2005

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Applicant(s): David V. Horak, et al.

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John S. Sensny

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(Signature)

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Applicant(s): David V. Horak, et al.						
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Invention: FORMATION OF A FAT DISPOSABLE SPACER TO POST DOPE A GATE CONDUCTOR						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	18 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0458/IBM</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p>						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 John S. Sensny <i>Signature</i>				Dated: November 22, 2005		
John S. Sensny Registration No. 28,757 Correspondence Address Customer No. 23389				<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p> <p>(Date) _____</p> <p><i>Signature of Person Mailing Correspondence</i></p> <p>_____ Typed or Printed Name of Person Mailing Correspondence</p>		
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Commissioner for Patents
P.O. Box 1450
Washington, D.C. 20231

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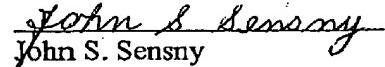
Sir:

In response to the Office Action dated August 22, 2005, please amend the subject patent application as follows.

CERTIFICATION OF FACSIMILE TRANSMISSION

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Dated: November 22, 2005


John S. Sensny